	PA	Work Reduction A TENT APPI		ON FEE DE	CEILGREAT	ON RECOR	D	THE SO IT UIS	DEPARTMENT Plays a valid OMI Sylon of Docket I	sour bitted E
		CLAIMS	AS FILEI	D - PART I	•			/- 1	7 0 3.0	10-2
(Column 1) (Column 2)						SMA	SMALL ENTITY		OTHER THAN SMALL ENTITY	
FOR		NUI	NUMBER FILED		MBER EXTRÁ	2275		7		1
BASIC FEE (37 CFR 1.18(a))						RATE	FEE	⊣	RATE	FEE
	CLAIMS					┨┣──	- '	OR		5
37 CFR 1.18(c)) NDEPENDENT CLAIMS		VIMS -	minus 20 =			X 5	= .	OR	x s=	
37 CFR 1.18(b)) minus 3 =			3 = .		x s	-	OR	x 7 =		
MULTI	PLE DEPEND	ENT CLÁIM PRES	ENT	(37 CFR 1.16(d))		+5		OR		
If the	difference in	column 1 is less	than zero	enter "O" in colum				√ ∵‴		
					2.	TOTAL	L	OR	TOTAL	L
1.		LAIMS AS A	MENDE	D - PART II						
//-	フカ	(Column 1)		(Column 2)	(Column 3)			OR	OTHE	R THAN
√		CLAIMS		HIGHEST	(colouin 2)	SMAL	L ENTITY	- , ~~		ENTITY
		. REMAINING AFTER		NUMBER PREVIOUSLY	PRESENT	RATE	ADDI-	1	RATE	ADDI-
<u> </u>	Total	AMENDMENT		PAID FOR			TIONAL FEE	1		TIONAL FEE
٥١٥	7 CFR 1.16(c))		Minus	19	/ =	x s =		J dR	X \$ =	
	rdependent 17 CFR 1,16(b))	<u> </u>	Minus	··· 6	-	x.s_ =	T .	1/		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)					~	 	OR	× s=	
ナ,	25 1	77. /3	10	2 > >	OFR 1.16(0))C	TOTAL	/	OR	+ 5=	
1/1	180	XX15/	///	1001		ADD'L FEE	' /	OR	TOTAL ADD'L FEE	/
7	125	(Column 1)	•	(Column 2)	(Column 3)	•	- 			
ا۵		REMAINING		HIGHEST NUMBER	PRESENT			1		
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	Total	· //	Minus	PAID FOR	= 0	ļ	FEE	,		FEE /
150	de pendent	·/b	Minus	27	+ 4-	X \$=	<u> </u>	OR	x s=	
(37	CFR 1.16(b))	- X		6		x s =	<u> </u>	OR	Х \$_ =	X
FIF	RST PRESENT	ATION OF MULTIPL	E DEPEND	ENT CLAIM (37 C	FR 1.16(d))	+ 5 =		OR	+5 =	- -
						TOTAL	1	J 01 1	TOTAL	
						ADD'L FEE	<u> </u>	OR	ADD' FEE	
Т		(Column 1) CLAIMS		(Column 2)	(Column 3)					
	- 1	REMAINING]]	HIGHEST . NUMBER	PRESENT	RATE	ADQI-	1	PATE	
L		AFTER AMENDMENT		PREVIOUSLY PAID FOR	EXTRA		TIONAL		RATE.	ADDI: TIONAL
(37 (Total CFR 1.18(c))	•	Minus	••	=		FEE	}		FEE
(37 (Inde (37 (ependent CFR 1.16(b))	•	Minus	***	=	x s=	 	OR	X 5=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					× \$=	ļ	OR	x s=	<u>·</u>
* IR	SI PRESENTA	LITION OF MULTIPLE	DEPĘNDE	NT CLAIM (37 CF	R 1.16(d))	+ \$=	<u> </u>	OR	+ s =	. 7
						TOTAL ADD'L FEE			TOTAL	

The 'Highest Number Previously Paid For' (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1 16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademaik Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT-SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.